MAR 2 1 2006

R 2 1 2006	erwork Reduction Act of 199	5, no person are required to	U.S. Pater	nt and Traden	oved for use through nark Office; U.S. DEF ion unless it displays	7/31/2006. OF	COMMERCE		
Effective on 12/08/2004.  FEE TRANSMITTAL  For FY 2005			Complete if Known						
			Application (talifor		09/839485				
			· imig Date		April 20, 2001				
					Bruce S. Lavoie J. I. Michalski				
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit 2644						
TOTAL AMOUN	Attorney Docket No. KHEN-P01-0		KHEN-P01-00	1					
METHOD OF	PAYMENT (check all	that apply)							
Check Credit Card Money Order Other (please identify):  X Deposit Account Deposit Account Number: 18-1945 Deposit Account Name: Ropes & Gray LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)    X   Charge fee(s) indicated below									
FEE CALCUL	ATION						· · · · · · · · · · · · · · · · · · ·		
1. BASIC FILING			ARCH FEES  Small Entity Fee (\$)		NATION FEES  Small Entity Fee (\$)	Fees Pa	aid (\$)		
Utility	300	150 500	250	200	100				
Design	200	100 100	50	130	65				
Plant	200	100 300	150	160	80				
Reissue	300	150 500	250	600	300				
Provisional	200	100 0	0	0	0				
	20 (including Reissue nt claim over 3 (includ					50 200 360	Email Entity Fee (\$) 25 100 180		
			Pald (\$) Multiple Depend			ent Claims			
25 -24 = 1 x 25.00 = 25.00			5.00	<u>F</u>	<u>ee (\$)</u> <u>F</u>	Fee Paid (\$)			
3. APPLICATIO	tion and drawings exce	Fee (\$) Fee eed 100 sheets of paper e application size fee di	Paid (\$)  (excluding elecue is \$250 (\$125	tronically f	iled sequence or entity) for each a	computer dditional 50	<del>-</del>		
sheets or fr	action thereof. See 35	U.S.C. 41(a)(1)(G) and	137 CFR 1.16(s)	).					
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = /50 (round up to a whole number) x =									
4. OTHER FEE	(S)				· <del></del>	Fees F	Paid (\$)		
	•	fee (no small entity disc	count)						
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 395.00									
SUBMITTED BY	/- 01	n.							
Signature	Wolfferd		Registration No. (Attorney/Agent)	40,256	Telephone	(617) 951-7681			
Name (Print/Type)	Wolfgang E. Styrius	s			Date	March 17	, 2006		
	<u> </u>								

I hereby certify that this correspond an envelope addressed to: MS RC below.	F. Commissioner for Pa	tents. P.O. B <b>c/0</b> 1450.	. Alexandria, VA 22313-145	50, on the date shown
Dated: March 17, 2006	. Sign	ature V Jau	n Class	_ (Dawn Marie Class)